

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/551,743

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3	/					
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49						
50						
TOTAL IND.						
			↓		↓	↓
TOTAL DEP.			←		←	←
TOTAL CLAIMS						

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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96						
97						
98						
99						
100						
TOTAL IND.						
			13		↓	↓
TOTAL DEP.			62		←	←
TOTAL CLAIMS			75			

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FILING DATE

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	101			/				151					
102				/			152						
103				/			153						
104				/			154						
105				/			155						
106				/			156						
107				/			157						
108				/			158						
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145							195						
146							196						
147							197						
148							198						
149							199						
150							200						
TOTAL IND.	8						TOTAL IND.						
TOTAL DEP.	55						TOTAL DEP.						
TOTAL CLAIMS	63						TOTAL CLAIMS						